

FORM PTO-1083

**Official**

RECEIVED  
7/8/03 MS

Attorney Docket No. 81800.0011  
Patent Application No. 09/428,836

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re application of:

Yoshifumi TANIMOTO

Serial No: 09/428,836

Filed: October 28, 1999

For: NETWORK PRINTING APPARATUS

Art Unit: 2622

Examiner: M. Mitchell

I hereby certify that this correspondence is being transmitted via facsimile to (703) 872-9314: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on

July 8, 2003

Date of Deposit

Diane Zynn

Name

Signature

07/08/03

Date

Mail Stop Non-Fee Amendment

Commissioner for Patents

P.O. Box 1450

Alexandria, VA 22313-1450

Dear Sir:

Transmitted herewith is an amendment in the above-identified application.

- ☐ Small entity status has been claimed. See 37 CFR § 1.27.
- ☐ A certified copy of \_\_\_ Patent Application No. \_\_\_ filed \_\_\_ from which priority is claimed under 35 U.S.C. § 119 is enclosed.
- ☐ A Notice Of Change Of Attorney's Address and Associate Power Of Attorney is enclosed.
- ☒ No additional fee is required.

The fee has been calculated as shown below:

|   | (Col. 1)<br>CLAIMS REMAINING<br>AFTER AMENDMENT |   | (Col. 2)<br>HIGHEST NUMBER<br>PREVIOUSLY PAID FOR | (Col. 3)<br>PRESENT<br>EXTRA* | LG/SM<br>\$ ENTITY FEE                               | ADD'L<br>FEE DUE |
|---|---|---|---|-------------------------------|--|------------------|
| TOTAL CLAIMS FEE                                | 12  | - | 20 **   | 0                             | LG=\$18<br>SM=\$9                                    | \$ 0             |
| INDEPENDENT<br>CLAIMS FEE                       | 3   | - | 4 ***   | 0                             | LG=\$84<br>SM=\$42                                   | \$ 0             |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIMS |   |   |   |                               | LARGE ENTITY FEE = \$280<br>SMALL ENTITY FEE = \$140 | \$ 0             |
| Independent Claims: 4, 8, 15                    |   |   |   |                               | TOTAL  | \$ 0             |

\* If the entry in Col. 1 is less than the entry in Col. 2, write "0" in Col. 3.

\*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, write "20" in this space.

\*\*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, write "3" in this space. The "Highest Number Previously Paid For" (Total or Independent) is the highest number found from the equivalent box on Col. 1 of a prior amendment or the number of claims originally filed.

- ☐ A check in the amount of \$ 0 to cover the additional claims fee is enclosed. A copy of this sheet is enclosed.
- ☐ A check in the amount of \$ 0 to cover the extension fee is enclosed. A copy of this sheet is enclosed.
- ☒ The Commissioner is hereby authorized to charge any deficiencies of fees associated with this communication or credit any overpayment to Deposit Account No. 50-1314. A copy of this sheet is enclosed.
- ☒ Any filing fees under 37 C.F.R. § 1.16 for the presentation of extra claims
- ☒ Any patent application processing fees under 37 C.F.R. § 1.17

Respectfully submitted,  
HOGAN & HARTSON L.L.P.

By: Erin P. Madill

Erin P. Madill  
Registration No. 46,893  
Attorney for Applicant(s)

Date: July 8, 2003

Biltmore Tower  
500 South Grand Avenue, Suite 1900  
Los Angeles, California 90071  
Telephone: 213 337-6700  
Facsimile: 213 337-6701